

DECLARATION FOR PATENT APPLICATION

As a below named inventor, I hereby declare that:

Docket Number: DB19

My residence, post office address and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled "Novel Inhibitors of IMPDH Enzyme", the specification of which is attached hereto unless the following line is checked:

_____ was filed on _____ as United States Application Number or PCT International Application Number _____ and was amended on _____ (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in Title 37, Code of Federal Regulations, § 1.56.

I hereby claim foreign priority benefits under Title 35, United States Code, § 119(a)-(d) or § 365(b) of any foreign application(s) for patent or inventor's certificate, or § 365(a) of any PCT International application which designated at least one country other than the United States, listed below and have also identified below, by checking the line, any foreign application for patent or inventor's certificate, or PCT International application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application(s)

Priority Claimed

_____	_____	_____	Yes	No
(Number)	(Country)	(Day/Month/Year Filed)		
_____	_____	_____	Yes	No
(Number)	(Country)	(Day/Month/Year Filed)		

I hereby claim the benefit under Title 35, United States Code, § 119(e) of any United States Provisional application(s) listed below.

60/106,180	October 29, 1998
(Application Number)	(Filing Date)
_____	_____
(Application Number)	(Filing Date)

I hereby claim the benefit under Title 35, United States Code, § 120 of any United States application(s), or § 365(c) of any PCT International application designating the United States, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT International application in the manner provided by the first paragraph of Title 35, United States Code, § 112, I acknowledge the duty to disclose information which is material to patentability as defined in Title 37, Code of Federal Regulations, § 1.56 which became available between the filing date of the prior application and the national or PCT International filing date of this application.

_____	_____	_____
(Application Number)	(Filing Date)	(Status-patented, pending, abandoned)
_____	_____	_____
Application Number)	(Filing Date)	(Status-patented, pending, abandoned)

I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith:

Thomas R. Savitsky, Reg. No. 31,661; Audrey F. Sher, Reg. No. 39,024, P.O. Box 4000, Princeton, NJ 08543-4000; all of Bristol-Myers Squibb Company.

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I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Full name of sole or first joint inventor, if any (given name, family name) Henry H. Gu
Third Inventor's signature [Signature] Date _____
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Inventor's signature T.G. Murali Dhar Date _____
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Full name of third joint inventor, if any (given name, family name) Edwin J. Iwanowicz
Second Inventor's signature [Signature] Date 10/26/99
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Full name of fourth joint inventor, if any (given name, family name) _____
Fourth Inventor's signature _____ Date _____
Residence _____ Citizenship _____
Post Office Address _____

_____ Additional inventors are being named on separately numbered sheets attached hereto.